

TO/SB/17 (12-04)

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Effective on 12/08/2004 Complete if Known Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/663,995 Application Number FEE TRANSMITTAL September 17, 2003 Filing Date LEE, Soon Jo et al. First Named Inventor **FOR FY 2005 Examiner Name** Gravini, Stephen Art Unit 3749 Attorney Docket No. 9988.059.00 OTAL AMOUNT OF PAYMENT

TOTAL AMOUNT OF PAY	MENI	(\$) 950.00		Attorney De	onet 140.	0000.000.00			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-0911 Deposit Account Name: McKenna Long & Aldridge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARC	FILING	G FEES Small Entity	SEARCH	Small Entity		TION FEES Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100	\$		
Design	200	100	100	50	130	65 80			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entire Fee (\$) Fee (\$) 25 20 100 360 180									
•	xtra Claims	Fee (\$)	Fee Pai	i d (\$)	Multi	iple Depende	ent Claims		
6 - 20 or HP =	>		= \$		Fe	ee (\$)	Fee Paid (\$)		
HP = highest number of total cl Indep. Claims E 2 - 3 or HP = HP = highest number of indepe	xtra Claims	Fee (\$) x 200.00	Fee Pai = \$ nan 3	i d (\$)		· · · · ·			
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee(\$) Fee Paid (\$) 100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Other: Notice of App							Fee Paid (\$) \$ 950.00		
SUBMITTED BY					-				

SUBMITTED BY		• • • • • • • • • • • • • • • • • • • •		
Signature	Renny Candle	dey No. 46,601	Registration No. (Attorney/Agent)	Telephone 202.496.7500
Name (Print/Type)	Mark R. Kresloff	,	42,766	Date: August 10, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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